

File with:  
Iowa Ethics and Campaign  
Disclosure Board  
510 E. 12<sup>th</sup>, Ste. 1A  
Des Moines, Iowa 50319  
Fax: 515-281-4073



IA ETHICS AND  
CAMPAIGN DISCLOSURE BOARD

2007 NOV -1 AM 11:18

FOR INSTRUCTIONS, SEE BACK OF FORM  
**DISCLOSURE SUMMARY PAGE**

**COMMITTEE NAME** (Must be same as on Statement of Organization)

The Committee to Elect Matt Schultz

IMPORTANT: Indicate by # type of committee you are reporting for: 6

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party  
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political  
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

**CANDIDATE COMMITTEES ONLY:**

Candidate Name

Matt Schultz

Political Party (if applicable)

n/a

Office Sought

Council Bluffs City Council

District (if Senate or House)

n/a

FORM

DR-2

(Rev. 07/2007)

DISCLOSURE

REPORT

**For Office Use Only**

Comm. # \_\_\_\_\_

Logged In \_\_\_\_\_

Scanned \_\_\_\_\_

Computer \_\_\_\_\_

Audited \_\_\_\_\_

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

(712) 328-1833

11/01/07

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A 11/01/2007

(report date)

REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

November 6, 2007

County & Local Committees, enter County in  
which Election is held  
Pottawattamie

**STATEMENT OF CASH ON HAND**

**CASH ON HAND** at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

1,574.34

**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (\*also see in-kind below)

805.00

Schedule F: Loans Received total (Attach Schedule F)

0.00

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0.00

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

2,379.34

**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (\*\*also see debts and loans below)

1,487.25

Schedule F: Loan Repayments total (Attach Schedule F)

0.00

**CASH ON HAND** at the end of this reporting period (if final report balance must be zero)

892.09

\*\*UNPAID BILLS (From Schedule D - Attach Schedule D)

0.00

\*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

0.00

\*\*OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

1,000.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

**CANDIDATE COMMITTEES ONLY:**

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

0.00

**STATE COMMITTEES:** Submit a reconciled campaign account bank statement in January of each year.

\_\_\_\_\_

<b>SCHEDULE</b> <b>A</b> (Rev. 07/03)	<b>MONETARY RECEIPTS</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF AMENDING FORM</b>	

(Including candidate's personal funds)

## The Committee to Elect Matt Schultz

**STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.**

**NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.**

**CAUTION:** Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
	ID#  CK#	PLEASE SEE ATTACHMENT		\$	<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
	ID#  CK#				<input type="checkbox"/>
SUB-TOTAL				\$	
TOTAL (if last page of this schedule)				\$ 805	

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2  
(for Schedule A)

## Contributions - Money Taken In

<u>Date Received</u>	<u>Name</u>	<u>Address</u>	<u>Relationship to Candidate</u>	<u>Amount Received</u>	<u>Check if for Fundraiser Income</u>	<u>Cash or Check</u>
10/8/2007	Walsh, Matt & Barb	1514 Skyline Dr. Council Bluffs, IA 51503		\$20.00	X	Cash
10/8/2007	Jerkovich, John	535 W. Broadway, Suite 100 Council Bluffs, IA 51503		\$50.00	X	Check
10/8/2007	Hoff, Ted & Polly	18 Norwood Ct. Council Bluffs, IA 51503		\$50.00	X	Check
10/8/2007	Mathiasen, Gerald & Cynthia	224 Elmwood Dr. Council Bluffs, IA 51503		\$20.00	X	Check
10/8/2007	Hartman, Scott & Ann	811 Birchwood Circle Council Bluffs, IA 51503		\$40.00	X	Check
10/8/2007	Southwick, Nathan & Ashlee	48 East Ridge Drive Council Bluffs, IA 51503		\$25.00	X	Check
10/8/2007	Welch, Verne	17964 Bent Tree Ridge Council Bluffs, IA 51502		\$100.00	X	Check
10/8/2007	Hamilton, Paul & Eva	606 Simms Ave. Council Bluffs, IA 51503		\$100.00	X	Check
10/8/2007	Coats, Donald & Barbara	12574 Deerfield Ct. Council Bluffs, IA 51503		\$250.00	X	Check
10/8/2007	Heinrich, Carl	816 Birchwood Cir. Council Bluffs, IA 51503		\$50.00	X	Check
10/8/2007	Drummey, Douglas & Haifa	115 Oran Circle Council Bluffs, IA 51503		\$25.00	X	Check
10/8/2007	Dahlgaard, R.C.	126 E. Broadway Suite 2 Council Bluffs, IA 51503		\$25.00	X	Check
10/8/2007	Miller, Richard & Deanne	1611 Madison Ave. Council Bluffs, IA 51503		\$50.00	X	Check
<b>TOTAL:</b>				<b>\$805.00</b>		

Page 2 of 2

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

**STATE PAC COMMITTEES: NOTE:** FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

<b>SCHEDULE</b> <b>B</b> (Rev. 07/03)	<b>MONETARY</b> <b>EXPENDITURES</b>
<input type="checkbox"/> <b>CHECK THIS BOX IF</b> <b>AMENDING FORM</b>	

**COMMITTEE NAME** (Must be same as on Statement of Organization)

The Committee to Elect Matt Schultz

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
	ID#  CK#	PLEASE SEE ATTACHMENT		\$
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
	ID#  CK#			
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$ 1,487.25

**THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:**

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(f).)

Page 1 of 2

(for Schedule B)

### **Expenditures - Money Spent**

<u>Date Expended</u>	<u>Name</u>	<u>Address</u>	<u>Purpose</u>	<u>Amount Expended</u>
10/5/2007	Southwick, Nate	48 East Ridge Drive Council Bluffs, IA 51503	Reimbursement for 34 Post Card Stamps	\$8.84
10/6/2007	OfficeMax	505 E 30th Ave. Council Bluffs, IA 51501	300 Flyers	\$22.47
10/7/2007	Schultz, Zola	376 Benton St. Council Bluffs, IA 51503	Reimbursement for Fundraiser Costs at Pizza King.	\$150.00
10/11/2007	Nonpareil	535 W. Broadway Suite 300 Council Bluffs, IA 51503	Newspaper Adds	\$140.00
10/12/2007	Schultz, Zola	376 Benton St. Council Bluffs, IA 51503	Reimbursement for Foam Poster Board for TV Commercial.	\$14.18
10/16/2007	USPS	Council Bluffs Main PO Council Bluffs, IA 515019998	3,380 Post Card Stamps for mailer	\$878.80
10/20/2007	Southwick, Nate	48 East Ridge Dr. Council Bluffs, IA 51503	Reimbursement for 500 Photocopies from Officemax Flyer	\$37.45
10/20/2007	Office Max	505 E 30th Ave. Council Bluffs, IA 51501	1,000 copies for flyer	\$64.20
10/24/2007	Office Max	505 E 30th Ave. Council Bluffs, IA 51501	845 copies on Card Stock & Cutting for Mailer	\$159.01
10/30/2007	Southwick, Nate	48 East Ridge Dr. Council Bluffs, IA 51503	Reimbursement for 30 first class stamps	\$12.30
<b>TOTAL</b>				<b>\$1,487.25</b>

Page 2 of 2

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

The Committee to Elect Marti Schulz

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 1,000.00

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT OF LOAN
			\$

TOTAL (PART I) \$ 0.00

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E - In-kind Contributions)

DATE PAID (MM/DD/YY)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II) \$ 0.00

From Schedule E - TOTAL LOANS FORGIVEN \$ 0.00

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1,000.00

\*Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column when it applies.

SCHEDULE  
**F**  
(Rev. 07/03)

LOANS  
RECEIVED  
& REPAYED

☐ CHECK THIS BOX IF  
AMENDING FORM